

**2014**

**BACKBONE STATE PARK ANTLERLESS DEER HUNT**

**APPLICATION**

**FULL NAME** (print) \_\_\_\_\_

**Last**

**First**

**MI**

**MAILING ADDRESS:** \_\_\_\_\_

Street – Rural Route – Box Number – Post Office Box Number

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_

**Driver's License or DNR Number** \_\_\_\_\_

**Telephone Number** \_\_\_\_\_

I certify that the above information is correct. I have not submitted more than one application. I understand that I must attend a Safety/Orientation Meeting prior to obtaining this license for hunting Antlerless Deer.

**Signature** \_\_\_\_\_

**Mail To: Backbone State Park 1347 129<sup>th</sup> St. Dundee, IA 52038**

**\*Applications must be received by October 1, 2014.**

**\*Successful applicants will be notified by mail.**

**\*Do Not Send Payment**